

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)USE FEC MAILING LABEL  
OR TYPE OR PRINT ▼Example: If typing, type  
over the lines

RICHARD E NEAL FOR CONGRESS COMMITTEE

ADDRESS (number and street)  
▼

76 MAGNOLIA TERRACE

☐Check if different  
than previously  
reported. (ACC)

SPRINGFIELD

MA

01108

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00226522

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

MA

02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☐

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☒

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

11

07

2006

in the  
State of

MA

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

10

01

2006

through

10

18

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Mr. Michael F. Hall

Signature of Treasurer

Electronically Filed by Mr. Michael F. Hall

Date

10

24

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

RICHARD E NEAL FOR CONGRESS COMMITTEE

Report Covering the Period:

From:

M M  
1 0D D  
0 1Y Y Y Y  
2 0 0 6

To:

M M  
1 0D D  
1 8Y Y Y Y  
2 0 0 6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	16290.00	606846.98
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	16290.00	606846.98
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	11632.08	328650.05
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	295.56
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	11632.08	328354.49
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1333860.11	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name

RICHARD E NEAL FOR CONGRESS COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	0	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
1	0	1	8	2	0	0	6

## I. RECEIPTS

COLUMN A  
Total This PeriodCOLUMN B  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

4100.00

165456.81

(ii) Unitemized.....

1190.00

91722.00

(iii) TOTAL of contributions

5290.00

257178.81

from individuals..... ►

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees  
(such as PACS).....

11000.00

349668.17

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

16290.00

606846.98

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES.....

0.00

0.00

## 13. LOANS

(a) Made or Guaranteed by the  
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING  
EXPENDITURES  
(Refunds, Rebates, etc.).....

0.00

295.56

## 15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.00

46580.39

16. TOTAL RECEIPTS (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ►

16290.00

653722.93

# DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	11632.08	328650.05
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	25260.00	200420.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	36892.08	529070.05

## III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1354462.19
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	16290.00
25. SUBTOTAL (add Line 23 and Line 24).....	1370752.19
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	36892.08
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1333860.11

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 5 / 16

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

RICHARD E NEAL FOR CONGRESS COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. John J. Callahan Mailing Address 637 Baylor Road City State Zip Code Glen Burnie MD 21061 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer none Occupation retired Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.21317 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. John T. Collins Mailing Address 5961 Searl Terrace City State Zip Code Bethesda MD 20816 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Steptoe & Johnson Occupation Attorney Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.21316 Amount of Each Receipt this Period 500.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<b>C.</b> Full Name (Last, First, Middle Initial) Dr. Benjamin Liptzin Mailing Address 187 Williamsburg Drive City State Zip Code Longmeadow MA 01106 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Baystate Health System Occupation Psychiatrist Receipt For: 2006 Election Cycle-to-Date ▼ <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.21339 Amount of Each Receipt this Period 100.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 16

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

RICHARD E NEAL FOR CONGRESS COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) Mohegan Tribe		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 1 / 2 0 0 6	
Mailing Address 5 Crow Hill Road		<b>Transaction ID:</b> SA11A1.21350	
City Uncasville	State CT	Zip Code 06382	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Funds Permissible Under the Act <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Mr. William L. Putnam		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 1400 W Mars Hill Road		<b>Transaction ID:</b> SA11A1.21371	
City Flafstaff	State AZ	Zip Code 86001	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer none		Occupation retired	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2250.00		

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

4100.00

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 16

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

RICHARD E NEAL FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

**A.** AMERICAN FEDERATION OF STATE, COUNTY AND MUNICIPAL EMPLOYEES, AFL-CIO (D.C.)

Mailing Address 1625 L STREET, N.W.

City State Zip Code  
 WASHINGTON DC 20036

FEC ID number of contributing  
federal political committee.

**C** C70000120

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4500.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11C.21413

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** HSBC NORTH AMERICA POLITICAL ACTION COMMITTEE (H-PAC)

Mailing Address 2700 Sanders Road

City State Zip Code  
 Prospect Heights IL 60070

FEC ID number of contributing  
federal political committee.

**C** C00033423

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 0 / 2 0 0 6

Transaction ID: SA11C.21372

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** LABORERS' POLITICAL LEAGUE-LABORERS' INTERNATIONAL UNION OF NA

Mailing Address 905 16TH STREET, N.W.

City State Zip Code  
 WASHINGTON DC 20006

FEC ID number of contributing  
federal political committee.

**C** C00007922

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11C.21414

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 16

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

RICHARD E NEAL FOR CONGRESS COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL RURAL LETTER CARRIERS' ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1630 DUKE STREET 4TH FLOOR

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing  
federal political committee.

**C** C00072025

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11C.21415

Amount of Each Receipt this Period

4000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
PFIZER INC. PAC

Mailing Address 235 EAST 42ND STREET

City State Zip Code  
NEW YORK NY 10017

FEC ID number of contributing  
federal political committee.

**C** C00016683

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11C.21412

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

11000.00



# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 16

☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

RICHARD E NEAL FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

## **A. Aramark Services**

Mailing Address 291 Springfield Street

City State Zip Code  
 Chicopee MA 01013

Purpose of Disbursement

Event Catering

Candidate Name

003  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB17.21391

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

1438.50

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Balise Leasing Corporation**

Mailing Address 1371 Riverdale Street

City State Zip Code  
 West Springfield MA 01089

Purpose of Disbursement

auto lease

Candidate Name

002  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB17.21378

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

641.38

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Bobby Van's Steakhouse**

Mailing Address 809 15th Street

City State Zip Code  
 Washington DC 20005

Purpose of Disbursement

Event Expense

Candidate Name

003  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB17.21409

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

1794.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

3873.88

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 / 16

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICHARD E NEAL FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

**A.** Carey's Flowers Inc.

Mailing Address 300 Newton Street

City	State	Zip Code
South Hadley	MA	01075

Purpose of Disbursement  
flowers

Candidate Name

001
Category/ Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	2006
<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> General

**Transaction ID:** SB17.21390

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	5		2	0	0	6

Amount of Each Disbursement this Period

213.52

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Congressional Federal Credit Union VISA

Mailing Address PO Box 3322

City	State	Zip Code
Oakton	VA	22124

Purpose of Disbursement  
misc

Candidate Name

001
Category/ Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	2006
<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> General

**Transaction ID:** SB17.21408

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	4		2	0	0	6

Amount of Each Disbursement this Period

51.98

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Francis Flowers

Mailing Address 78 Prospect Street

City	State	Zip Code
Milford	MA	01757

Purpose of Disbursement  
flowers

Candidate Name

001
Category/ Type

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	2006
<input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	<input checked="" type="checkbox"/> General

**Transaction ID:** SB17.21376

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	5		2	0	0	6

Amount of Each Disbursement this Period

41.70

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**SUBTOTAL** of Disbursements This Page (optional) .....

307.20

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3 )  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 / 16

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICHARD E NEAL FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

**A.** Gulf Oil Corporation

Mailing Address Post Office Box 41591

City Philadelphia State PA Zip Code 19162

Purpose of Disbursement

Travel Expenses

Candidate Name

002

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.17293

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	6

Amount of Each Disbursement this Period

84.15

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Gulf Oil Corporation

Mailing Address Post Office Box 41591

City Philadelphia State PA Zip Code 19162

Purpose of Disbursement

Travel Expenses

Candidate Name

002

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.17310

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	1	/	2	0	0	6

Amount of Each Disbursement this Period

94.15

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Itala Printing

Mailing Address 38 Mill Street

City Springfield State MA Zip Code 01105

Purpose of Disbursement

Printing

Candidate Name

003

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.21380

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	0	5	/	2	0	0	6

Amount of Each Disbursement this Period

3420.81

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

3599.11

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

RICHARD E NEAL FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

## **A. Jewish Advocate**

Mailing Address Post Office Box 60591

City Longmeadow State MA Zip Code 01106

Purpose of Disbursement  
Advertising

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.21383

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

282.24

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. Mr. Brendan Neal**

Mailing Address 36 Atwater Terrace

City Springfield State MA Zip Code 01107

Purpose of Disbursement  
salary

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.21404

Date of Disbursement

10 / 11 / 2006

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. Reminder**

Mailing Address 280 North Main Street

City East Longmeadow State MA Zip Code 01025

Purpose of Disbursement  
Advertising

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.21405

Date of Disbursement

10 / 11 / 2006

Amount of Each Disbursement this Period

238.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1020.99

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

RICHARD E NEAL FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

**A.** Sir Speedy

Mailing Address 1441 Main Street

City  
Springfield

State  
MA

Zip Code  
01103

Purpose of Disbursement  
printing

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB17.21398

Date of Disbursement

10 / 06 / 2006

Amount of Each Disbursement this Period

443.02

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Staples Office Supplies

Mailing Address 1129 Riverdale Road

City  
West Springfield

State  
MA

Zip Code  
01089

Purpose of Disbursement  
supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB17.21397

Date of Disbursement

10 / 06 / 2006

Amount of Each Disbursement this Period

242.47

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Staples Office Supplies

Mailing Address 1129 Riverdale Road

City  
West Springfield

State  
MA

Zip Code  
01089

Purpose of Disbursement  
supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB17.21411

Date of Disbursement

10 / 16 / 2006

Amount of Each Disbursement this Period

103.85

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

789.34

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

RICHARD E NEAL FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

## **A. Student Prince Restaurant**

Mailing Address 8 Fort Street

City  
Springfield

State  
MA

Zip Code  
01103

Purpose of Disbursement  
lunch meeting

Candidate Name

007  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.21393

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

57.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **B. U.S. Postmaster**

Mailing Address Liberty Street

City  
Springfield

State  
MA

Zip Code  
01101

Purpose of Disbursement  
postage

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.21375

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

756.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

## **C. U.S. Postmaster**

Mailing Address Liberty Street

City  
Springfield

State  
MA

Zip Code  
01101

Purpose of Disbursement  
postage

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.21402

Date of Disbursement

10 / 06 / 2006

Amount of Each Disbursement this Period

390.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1203.10

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

RICHARD E NEAL FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

**A.** Verizon

Mailing Address Post Office Box 120250

City State Zip Code  
 Stamford CT 06912

Purpose of Disbursement  
 phone service

Candidate Name

001  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB17.21395

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

94.88

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Verizon

Mailing Address Post Office Box 120250

City State Zip Code  
 Stamford CT 06912

Purpose of Disbursement  
 phone service

Candidate Name

001  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB17.21396

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

60.34

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Verizon Wireless

Mailing Address 180 Washington Valley Road

City State Zip Code  
 Bedminster NJ 07921

Purpose of Disbursement  
 phone service

Candidate Name

001  
 Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB17.21394

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

47.19

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

202.41

**TOTAL** This Period (last page this line number only) .....

10996.03

# **SCHEDULE B (FEC Form 3 )** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

RICHARD E NEAL FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial)

**A. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE - CONTRIBUTIONS**

Mailing Address 430 South Capitol Street SE  
2nd Floor

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Unlimited Transfer - National Party Comm

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB21.21410

Date of Disbursement

MM / DD / YYYY  
10 / 13 / 2006

Amount of Each Disbursement this Period

25000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

25000.00

**TOTAL** This Period (last page this line number only) .....

25000.00